POLITICAL COMMITTEE

CITY/TOWN OF SURPRISE

CAMPAIGN FINANCE REPORT

2011 August/November Regular Election 3A. ID# Sponsoring Organization or Candidate and office Name of Candidate and Office Sought (if applicable) E-Mail Address Fax# DUE BETWEEN REPORTING PERIOD (Please check appropriate box) January 31 Report - For Period of_ * thru December 31, 2010 January 1, 2011 and January 31, 2011 Pre-General Election Report - For Period of September 20, 2011 thru October 19, 2011 October 20, 2011 and October 27, 2011 Column B SUMMARY Column A 5. Election Period Total This Reporting Total To Date Period 5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee) Cash on Hand at the Beginning of this Reporting Period 5b Total Receipts (from corresponding columns on Detailed 5c Summary Page, Line 8) Subtotal [add Lines b and c for Column A and add lines 5d a and c for Column B] Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18) Cash on Hand at Close of Reporting Period [Subtract

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Line 6b from Line 5d]

^{*}Insert date which is 21 days after date of last election (A.R.S. §16-913).

^{**}Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS Page 2 1. Committee Name: 2. ID# Report covering period from <u>T</u> RECEIPTS COLUMN A COLUMN B THIS PERIOD CAMPAIGN TO DATE 4. Contributions other than loans and in-kind: (a) Individuals - more than \$25 (Total from Schedule A) (b) Individuals - aggregate \$25 or less (Total from Schedule A-1) (c) Political Committees (Total from Schedule B) (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)] (e) Refund of contributions (Total from Schedule F-2) (f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)] 5. (a) Loans made or guaranteed by candidate (Total from Schedule C) (b) All other loans (Total from Schedule C-1) (c) Total Loans [add 5(a) and 5(b)] 6. In-kind contributions (Total from Schedule E) 7. Dividends, interest, and other forms of receipts (Total from Schedule F-1) 8. Total Receipts [add 4(f), 5(c), 6, and 7] **QUALIFYING CONTRIBUTION RECEIPTS** Qualifying Contributions of \$5 from Individuals (Total from Schedule A2). DISBURSEMENTS 75 75 9. Expenditures for operating expenses (Total from Schedule D) 10. Independent Expenditures (Total from Schedule D-1) 11. Value of In-kind expenditures (Total from Schedule E) 12. Loans made by reporting committee (Total from Schedule D-2) 13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4) (b) Repayment of all other loans (Total from Schedule D-5) (c) Total Loan Repayments [add 13(a) and 13(b)] 14. Transfers to other political committees (Total from Schedule D-6) 15. Any other disbursement (Total from Schedule D-7) 16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15] 17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3) 18. Total disbursements [subtract line 17 from line 16] 19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3) 20. I certify, under penalty of perjucy, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.

Type or Print Name of Treasurer

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

	1. Committee Name SMM ART 40 Rt -	Elect BICHDED Alla	n for Course	2. ID# / DET 2	2011-03
	3. Report covering period from TANI, 80	//thr	u MAJ31	2011	
4	CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS	CUMULATIVE TOTAL THIS CAMPAIGN
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OF			PERIOD	TO DATE
4a.	STREET ADDRESS	MI	3/31/11	100 00	1000
	CITY STATE PL	E DR. ZIP 85374			
	OCCUPATION HOLD	EMPLOYER N/5 -			
b.	ROCCA BERVARD	MI			
	STREET ADDRESS 1414 FOREST ANE		5/19/11	500	500
	EUDINSON IT	6020			
	OCCUPATION TETT RED	EMPLOYER //A			
c.	LAST FIRST	МІ			
	STREET ADDRESS		1		
	CITY STATE	ZIP			
	OCCUPATION	EMPLOYER			
d.	LAST FIRST	МІ			
	STREET ADDRESS				
	CITY STATE	ZIP	1		
	OCCUPATION	EMPLOYER			
e.	LAST FIRST	MI			
	STREET ADDRESS				
	CITY STATE	ZIP	1		
	OCCUPATION	EMPLOYER			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last p Summary Page Line 4(z), Column A]	age of Schedule A, transfer total to Detailed		1500	1500

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE ${f B}$

	1. Committee Name	amther to Replear Range Alten for A	2. ID# Westerf D5T-	2-2011-03
	3. Report covering period from TPV1, 20/1 thru MBY 31, 20/1			
4	IDE	CONTRIBUTIONS NTITY OF CONTRIBUTOR AND DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a	ID# AUXO 2366 DATE RECEIVED 4/6///	NAME, ADDRESS, CITY, STATE AND ZIP (AGA) GRANDE FIREFIGHTE AND 1000 E. PIGRENICE BLOD. CASA GRANDE AZ 85822	4000	41000
b.	D# O/389 DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP LIFE TEMPS CHIPPIER PACE PHOENIX P2 85012	42000	430 00
C.	DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP LINT I ASSIN OF FIRE FIGHERS PACE BENSON WAY. TUBSON MY 85714 (FREPAC)	43000	430 00
d.	DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP PINNAGE WEST, PAC FROM N. 6 + 1 St PHOGNIX AZ 85004	410 00	4100
е.	ID# 2020 410 DATE RECEIVED 4/2/9///	NAME, ADDRESS, CITY, STATE AND ZIP ON AL PHONIX AZ 85027	5000	500°
f.	ID# 359 DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP SHEET METAL WORKES PAR 2604 E. Adams 8t. PHOEN IX AZ 85034	4300	430 -0
g.	ID# //29 DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP ARIZON A MUH, HOUSING ASEN PACE 5110 N. 44 1 84. SUITE 1602 PHOENIX AZ 85018	2500	250 0
h.	ID # DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP		
i.	ID # DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP		
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A-0.2 M	C-2 11 11 11 11 11 11 11 11 11 11 11 11 11		5-2 S-1 S-2 S-2 S-1 S-2 S-2

SCHEDULE D-7

1. Committoe Name COMMATCH Sold Select Richard Report Selection (2.104) 3. Report covering period from SAN , ROLL ANY OTHER DISBURSEMENTS NAME, ADDRESS, AND IDB OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION B. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION RAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION DESCRIPTION		1. Committee Name Committee for RE-Elect Richard Phon for Chien	101/210#	- 1 / -
NAME, ADDRESS, CITY, STATE, ZIP AND IDB DISSURSEMENT MAS MADE: DESCRIPTION DISSURSEMENT MAS MADE: DESCRIPTION ASSOCIATED AND ASSOCIATE STATE, ZIP AND IDB DESCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION DESCRIPTION DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION		3. Report covering period from VANI, 2011 thru MAY 3	1,2011	-d-50/1-0
NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		ANY OTHER DISBURSEMENTS	DISBURSEMENT	OFTHE
DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND IDB DESCRIPTION O. DESCRIPTION			MADE	DISBURSEMENT
DESCRIPTION	a.		4/8/11	4500
DESCRIPTION C. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION O. NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
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d. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION o. NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION DESCRIPTION	C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
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NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION Organia	d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
DESCRIPTION		DESCRIPTION		
Ora k	ө.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]		DESCRIPTION		
landous and the second	5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]		8500

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EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE **D**

	1. Committee Name Commission & Re-elect Richard Alter factories	2. ID# DST-X	-2011-03
	3. Report covering period from VPN / 301/ thru MAY 3/	,2011	
4	EXPENDITURES	DATE EXPENDITURE	AMOUNT OF THE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	MADE	EXPENDITURE
4a.	NAME, ADDRESS, CITY-STATE AND ZIP PROCESSING	\$1.75	\$1.75
	PROCESSING FEE FOR (RELAT CARD COMPRIBUTION		
b.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
C.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
d.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
e.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
f.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		41.75

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^{*}Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

	1. Committee Name Smither Le Re-Elico Roman Roman Common Tans 1, 2011 40 Mm thru May 31, 4	2. ID# DIST &	2011-03
4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE AMOUNT	AMOUNT OF THE
	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED	RECEIVED	RECEIPT
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND 10# (COST) OF THE SECTION DISTALLA SECTION OF THE SECTION DISTALLA SECTION OF THE SECTION	759347	75920
	CLOSE OUT BALONES of 2007 ADAPPYGA ACCOUNT		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
е.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page Line 7 Column A		15929

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